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Substitute for form 1449B/PTO		<i>Complete if Known</i>		
INFORMATION DISCLOSURE STATEMENT BY APPLICANT		<i>Application Number</i>	10/586,501	
<i>(Use as many sheets as necessary)</i>		<i>Filing Date</i>	September 14, 2007	
<i>(Use as many sheets as necessary)</i>		<i>First Named Inventor</i>	Martin HENDRIX et al.	
<i>(Use as many sheets as necessary)</i>		<i>Art Unit</i>	1624	
<i>(Use as many sheets as necessary)</i>		<i>Examiner Name</i>	Deepak R. Rao	
Sheet	1	of	1	
			<i>Attorney Docket Number</i>	01-2118

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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